

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 336352

Entity Name: DOMINIQUE IMAGINATION CORP**Current Principal Place of Business:**6446 LAKE SUNRISE DRIVE
APOLLO BEACH, FL 33572**Current Mailing Address:**6446 LAKE SUNRISE DRIVE
APOLLO BEACH, FL 33572 US**FEI Number:** 59-1221722**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ARISTONDO, DOMINICA
6446 LAKE SUNRISE DRIVE
APOLLO BEACH, FL 33572 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P/D
Name	ARISTONDO, DOMINICA
Address	6446 LAKE SUNRISE DRIVE
City-State-Zip:	APOLLO BEACH FL 33572

Title	VP/T
Name	KAYE, ROBERT M
Address	6446 LAKE SUNRISE DRIVE
City-State-Zip:	APOLLO BEACH FL 33572

Title	S/D
Name	GOMEZ, RAMON
Address	800 BRICKELL AVENUE STE 800
City-State-Zip:	MIAMI FL 33131

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOMINICA ARISTONDO

PRES

04/20/2021

Electronic Signature of Signing Officer/Director Detail_____
Date